

Fill in this information to identify your case:

Debtor 1 **Ramon P DeOcampo**
First Name Middle Name Last Name

Debtor 2 **Kathleen T DeOcampo**
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number **17-34747**
(if known)

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)		
1a. Copy line 55, Total real estate, from Schedule A/B.....	\$	220,000.00
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$	113,472.00
1c. Copy line 63, Total of all property on Schedule A/B.....	\$	333,472.00

Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)		
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$	284,145.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$	0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$	87,722.34
Your total liabilities		\$ 371,867.34

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)		
Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$	8,342.66
5. Schedule J: Your Expenses (Official Form 106J)		
Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$	7,187.62

Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**
- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes
7. **What kind of debt do you have?**
- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

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8. **From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ **14,482.91**

9. **Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**

	Total claim
From Part 4 on <i>Schedule E/F</i>, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ 0.00
9g. Total. Add lines 9a through 9f.	\$ 0.00

Fill in this information to identify your case and this filing:

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First Name Middle Name Last Name

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(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

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Official Form 106A/B Schedule A/B: Property

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In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

☐ No. Go to Part 2.

☒ Yes. Where is the property?

1.1

175 Pulaski Avenue

Street address, if available, or other description

Sayreville NJ 08872-0000

City State ZIP Code

Middlesex

County

What is the property? Check all that apply

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other

Who has an interest in the property? Check one

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?
\$220,000.00

Current value of the portion you own?
\$220,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Tenancy by Entireties

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$220,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

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3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

3.1 Make: **Honda**
Model: **Accord**
Year: **2012**
Approximate mileage: **77,000**
Other information:

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
\$8,500.00	\$8,500.00

3.2 Make: **Subaru**
Model: **Legacy**
Year: **2007**
Approximate mileage: **91,000**
Other information:

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
\$3,900.00	\$3,900.00

3.3 Make: **Hyundai**
Model: **Elantra**
Year: **2007**
Approximate mileage: **40,400**
Other information:

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
\$3,000.00	\$3,000.00

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$15,400.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

- ☐ No
☒ Yes. Describe.....

Personal possessions

\$500.00

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7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

☒ Yes. Describe.....

Personal possessions

\$600.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No

☐ Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☒ No

☐ Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No

☐ Yes. Describe.....

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe.....

Personal possessions

\$100.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe.....

Gold necklaces, bracelets, earrings, wedding bands

\$600.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

☒ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

☒ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$1,800.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

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16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- ☒ No
☐ Yes.....

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

- ☐ No
☒ Yes..... Institution name:

17.1.	Checking	Wells Fargo	\$540.00
17.2.	Savings	Wells Fargo	\$48.00
17.3.	Checking	TD Bank	\$74.00
17.4.	Checking	Bank of America	\$8.00
17.5.	Savings	Bank of America	\$10.00
17.6.	Checking	TD Bank (Joint with Adult Son Funds in account are his) \$187.00	\$0.00
17.7.	Savings	TD Bank (Joint with Adult Son Funds in account are his) \$50.00	\$0.00
17.8.	Checking	TD Bank (Custodial Account Minor Daughter) \$4.00	\$0.00
17.9.	Savings	TD Bank (Custodial Account Minor Daughter) \$50.00	\$0.00

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

- ☐ No
☒ Yes..... Institution or issuer name:

	Johnson & Johnson Stock through employment (4 shares)	\$556.00
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19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

- ☒ No
☐ Yes. Give specific information about them.....
 Name of entity: % of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

- ☒ No
☐ Yes. Give specific information about them
 Issuer name:

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21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ No

☒ Yes. List each account separately.

Type of account:

Institution name:

401(k)

Johnson & Johnson; non-estate property pursuant to §541

\$72,205.00

401(k)

Home Depot; non-estate property pursuant to §541

\$17,706.00

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☐ No

☒ Yes.

Institution name or individual:

Utility

JCP&L

\$125.00

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes..... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☒ No

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

☒ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information.....

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30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☒ No
☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☐ No
☒ Yes. Name the insurance company of each policy and list its value.

Company name:	Beneficiary:	Surrender or refund value:
Metlife Term Life Insurance Policy; no cash value	Spouse	\$0.00
Metlife Term Life Insurance Policy; no cash value	Spouse	\$0.00
Term life insurance policy through employment; no cash value	Spouse	\$0.00

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- ☒ No
☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

- ☒ No
☐ Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

- ☒ No
☐ Yes. Describe each claim.....

35. Any financial assets you did not already list

- ☒ No
☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$91,272.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

- ☒ No. Go to Part 6.
☐ Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
 If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

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Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☐ No

☒ Yes. Give specific information.....

Timeshare -Ridge Top Village, Shawnee PA

\$5,000.00

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$5,000.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2		\$220,000.00
56. Part 2: Total vehicles, line 5	\$15,400.00	
57. Part 3: Total personal and household items, line 15	\$1,800.00	
58. Part 4: Total financial assets, line 36	\$91,272.00	
59. Part 5: Total business-related property, line 45	\$0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Total other property not listed, line 54	+ \$5,000.00	
62. Total personal property. Add lines 56 through 61...	\$113,472.00	Copy personal property total \$113,472.00
63. Total of all property on Schedule A/B. Add line 55 + line 62		\$333,472.00

Fill in this information to identify your case:

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	First Name Middle Name Last Name
Debtor 2	Kathleen T DeOcampo
(Spouse if, filing)	First Name Middle Name Last Name
United States Bankruptcy Court for the:	DISTRICT OF NEW JERSEY
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☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
175 Pulaski Avenue Sayreville, NJ 08872 Middlesex County Line from <i>Schedule A/B</i> : 1.1	\$220,000.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1)
2012 Honda Accord 77,000 miles Line from <i>Schedule A/B</i> : 3.1	\$8,500.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
2007 Subaru Legacy 91,000 miles Line from <i>Schedule A/B</i> : 3.2	\$3,900.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
2007 Hyundai Elantra 40,400 miles Line from <i>Schedule A/B</i> : 3.3	\$3,000.00	<input checked="" type="checkbox"/> \$3,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
Personal possessions Line from <i>Schedule A/B</i> : 6.1	\$500.00	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Personal possessions Line from Schedule A/B: 7.1	\$600.00	<input checked="" type="checkbox"/> \$600.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Personal possessions Line from Schedule A/B: 11.1	\$100.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Gold necklaces, bracelets, earrings, wedding bands Line from Schedule A/B: 12.1	\$600.00	<input checked="" type="checkbox"/> \$600.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)
Checking: Wells Fargo Line from Schedule A/B: 17.1	\$540.00	<input checked="" type="checkbox"/> \$540.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Savings: Wells Fargo Line from Schedule A/B: 17.2	\$48.00	<input checked="" type="checkbox"/> \$48.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Checking: TD Bank Line from Schedule A/B: 17.3	\$74.00	<input checked="" type="checkbox"/> \$74.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Checking: Bank of America Line from Schedule A/B: 17.4	\$8.00	<input checked="" type="checkbox"/> \$8.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Savings: Bank of America Line from Schedule A/B: 17.5	\$10.00	<input checked="" type="checkbox"/> \$10.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Checking: TD Bank (Joint with Adult Son Funds in account are his) \$187.00 Line from Schedule A/B: 17.6	\$0.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Savings: TD Bank (Joint with Adult Son Funds in account are his) \$50.00 Line from Schedule A/B: 17.7	\$0.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Checking: TD Bank (Custodial Account Minor Daughter) \$4.00 Line from Schedule A/B: 17.8	\$0.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Savings: TD Bank (Custodial Account Minor Daughter) \$50.00 Line from Schedule A/B: 17.9	\$0.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Johnson & Johnson Stock through employment (4 shares) Line from Schedule A/B: 18.1	\$556.00	<input checked="" type="checkbox"/> \$556.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
401(k): Johnson & Johnson; non-estate property pursuant to §541 Line from Schedule A/B: 21.1	\$72,205.00	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(12)
401(k): Home Depot; non-estate property pursuant to §541 Line from Schedule A/B: 21.2	\$17,706.00	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(12)
Utility: JCP&L Line from Schedule A/B: 22.1	\$125.00	<input checked="" type="checkbox"/> \$125.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Metlife Term Life Insurance Policy; no cash value Beneficiary: Spouse Line from Schedule A/B: 31.1	\$0.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(7)
Metlife Term Life Insurance Policy; no cash value Beneficiary: Spouse Line from Schedule A/B: 31.2	\$0.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(7)
Term life insurance policy through employment; no cash value Beneficiary: Spouse Line from Schedule A/B: 31.3	\$0.00	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(7)
Timeshare -Ridge Top Village, Shawnee PA Line from Schedule A/B: 53.1	\$5,000.00	<input checked="" type="checkbox"/> \$5,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)

3. **Are you claiming a homestead exemption of more than \$160,375?**
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
- ☒ No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☐ Yes

Fill in this information to identify your case:

Debtor 1	Ramon P DeOcampo		
	First Name	Middle Name	Last Name
Debtor 2	Kathleen T DeOcampo		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>DISTRICT OF NEW JERSEY</u>			
Case number (if known)	17-34747		

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Ally Financial Creditor's Name Attn: Bankruptcy Po Box 380901 Bloomington, MN 55438 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 2012 Honda Accord 77,000 miles As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)	\$20,215.00	\$8,500.00
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt		\$11,715.00	
Date debt was incurred Opened 06/15 Last 4 digits of account number 6056			

2.2 Midlsex Inv Creditor's Name 616 Highway 18 East Brunswick, NJ 08816 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 2007 Subaru Legacy 91,000 miles As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)	\$6,404.00	\$3,900.00
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt		\$2,504.00	

Debtor 1 **Ramon P DeOcampo** Case number (if know) **17-34747**
First Name Middle Name Last Name
Debtor 2 **Kathleen T DeOcampo**
First Name Middle Name Last Name

Opened
Date debt was incurred **4/08/17** Last 4 digits of account number **2831**

2.3	Quickn Loans Creditor's Name	Describe the property that secures the claim:	\$205,193.00	\$220,000.00	\$0.00
	1050 Woodward Ave Detroit, MI 48226 Number, Street, City, State & Zip Code	175 Pulaski Avenue Sayreville, NJ 08872 Middlesex County			
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt		As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Mortgage			

Opened
Date debt was incurred **02/17** Last 4 digits of account number **3168**

2.4	Shellpoint Mortgage Servicing Creditor's Name	Describe the property that secures the claim:	\$52,333.00	\$220,000.00	\$37,461.00
	Attn: Bankruptcy Po Box 10826 Greenville, SC 29603 Number, Street, City, State & Zip Code	175 Pulaski Avenue Sayreville, NJ 08872 Middlesex County			
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt		As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Mortgage			

Opened
Date debt was incurred **06/06** Last 4 digits of account number **2036**

Add the dollar value of your entries in Column A on this page. Write that number here:
If this is the last page of your form, add the dollar value totals from all pages.
Write that number here:

\$284,145.00
\$284,145.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Ally Financial 200 Renaissance Ctr Detroit, MI 48243	On which line in Part 1 did you enter the creditor? 2.1
		Last 4 digits of account number _____

Debtor 1 **Ramon P DeOcampo**
First Name Middle Name Last Name
Debtor 2 **Kathleen T DeOcampo**
First Name Middle Name Last Name

Case number (if know) **17-34747**



Name, Number, Street, City, State & Zip Code
Shellpoint Mortgage Servicing
75 Beattie Pl Ste 300
Greenville, SC 29601

On which line in Part 1 did you enter the creditor? **2.4**

Last 4 digits of account number ____

Fill in this information to identify your case:

Debtor 1 **Ramon P DeOcampo**
First Name Middle Name Last Name

Debtor 2 **Kathleen T DeOcampo**
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number **17-34747**
(if known)

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.
☐ Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

4.1	American General Financial/Springleaf Fi Nonpriority Creditor's Name Springleaf Financial/Attn: Bankruptcy De Po Box 3251 Evansville, IN 47731 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 3513 When was the debt incurred? Opened 10/13/10 Last Active 8/12/11 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Household Goods And Other Collateral Auto	\$0.00
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Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.2

**American General
Financial/Springleaf Fi**

Nonpriority Creditor's Name

**Springleaf Financial/Attn:
Bankruptcy De
Po Box 3251
Evansville, IN 47731**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **3190**

\$0.00

When was the debt incurred? **Opened 04/07 Last Active
6/11/10**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Note Loan**

4.3

**American General
Financial/Springleaf Fi**

Nonpriority Creditor's Name

**Springleaf Financial/Attn:
Bankruptcy De
Po Box 3251
Evansville, IN 47731**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **3513**

\$0.00

When was the debt incurred? **Opened 9/30/11 Last Active
1/19/12**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Household Goods And Other Collateral
Auto**

4.4

Capital One

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 30253
Salt Lake City, UT 84130**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **9412**

\$3,116.00

When was the debt incurred? **Opened 06/12 Last Active
6/30/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.5	Capital One Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 9163 When was the debt incurred? Opened 1/08/04 Last Active 7/24/17 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card	\$1,661.00
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4.6	Capital One Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 0150 When was the debt incurred? Opened 11/01 Last Active 7/24/17 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card	\$1,368.00
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4.7	Capital One Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 8005 When was the debt incurred? Opened 09/04 Last Active 7/24/17 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card	\$768.00
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Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.8	Capital One Auto Finance Nonpriority Creditor's Name 3901 Dallas Pkwy Plano, TX 75093 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 1001 When was the debt incurred? Opened 11/02 Last Active 3/21/08 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Automobile	\$0.00
4.9	Chase Card Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 9662 When was the debt incurred? Opened 09/16 Last Active 7/24/17 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card	\$2,943.00
4.10	Chase Mtg Nonpriority Creditor's Name P.o. Box 24696 Columbus, OH 43224 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 9740 When was the debt incurred? Opened 12/07 Last Active 2/22/17 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Real Estate Mortgage	\$0.00

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.1
1

Chase Mtg

Nonpriority Creditor's Name

**Po Box 24696
Columbus, OH 43224**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **4610**

\$0.00

When was the debt incurred? **Opened 02/05 Last Active 12/06/07**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Real Estate Mortgage**

4.1
2

Citibank / Sears

Nonpriority Creditor's Name

**Citicorp Credit Services/Attn:
Centraliz
Po Box 790040
Saint Louis, MO 63179**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **3611**

\$3,006.00

When was the debt incurred? **Opened 1/22/16 Last Active 7/14/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

4.1
3

Citibank/Best Buy

Nonpriority Creditor's Name

**Centralized Bk/Citicorp Credit Svcs
Po Box 790040
St Louis, MO 63179**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **0476**

\$2,453.00

When was the debt incurred? **Opened 11/13 Last Active 7/14/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.1
4

Citicards Cbna

Nonpriority Creditor's Name
**Citicorp Credit Svc/Centralized
Bankrupt
Po Box 790040
Saint Louis, MO 63179**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number **6614** **\$2,375.00**

When was the debt incurred? **Opened 03/08 Last Active 7/15/17**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.1
5

Citifinancia

Nonpriority Creditor's Name

**Attn: Bankruptcy
605 Munn Dr
Fort Mill, SC 29715**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number **6494** **\$0.00**

When was the debt incurred? **Opened 5/21/09 Last Active 3/03/11**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Unsecured**

4.1
6

Citifinancia

Nonpriority Creditor's Name

**Attn: Bankruptcy
605 Munn Dr
Fort Mill, SC 29715**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number **6776** **\$0.00**

When was the debt incurred? **Opened 3/12/08 Last Active 5/21/09**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Unsecured**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.1
7

Comenity Bank/Victoria Secret

Nonpriority Creditor's Name

Attn: Bankruptcy

Po Box 182125

Columbus, OH 43218

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **0167**

\$801.00

When was the debt incurred? **Opened 06/13 Last Active 7/24/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

4.1
8

Comenity Capital Bank/HSN

Nonpriority Creditor's Name

Po Box 182125

Columbus, OH 43218

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **8941**

\$0.00

When was the debt incurred? **Opened 05/10 Last Active 4/21/16**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

4.1
9

Comenity Capital/blair

Nonpriority Creditor's Name

Po Box 182125

Columbus, OH 43218

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **3018**

\$0.00

When was the debt incurred? **Opened 05/10 Last Active 11/21/10**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.2
0

Comenitycapital/boscov

Nonpriority Creditor's Name

**Po Box 182120
Columbus, OH 43218**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **5184**

\$0.00

When was the debt incurred? **Opened 07/15 Last Active 3/02/17**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

4.2
1

Comenitycapital/overst

Nonpriority Creditor's Name

**Comenity Bank
Po Box 182125
Columbus, OH 43218**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **1984**

\$373.00

When was the debt incurred? **Opened 06/16 Last Active 7/24/17**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

4.2
2

Dell Financial Services

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 81577
Austin, TX 78708**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **5137**

\$0.00

When was the debt incurred? **Opened 3/30/08 Last Active 5/17/13**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.2
3

Discover Financial

Nonpriority Creditor's Name

**Po Box 3025
New Albany, OH 43054**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **2381**

\$5,383.00

When was the debt incurred? **Opened 11/19/15 Last Active 8/02/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

4.2
4

Discover Financial

Nonpriority Creditor's Name

**Po Box 3025
New Albany, OH 43054**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **9552**

\$1,398.00

When was the debt incurred? **Opened 03/16 Last Active 6/23/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

4.2
5

First Premier Bank

Nonpriority Creditor's Name

**601 S Minnesota Ave
Sioux Falls, SD 57104**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **1145**

\$330.00

When was the debt incurred? **Opened 12/12 Last Active 8/05/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.2
6

First Premier Bank

Nonpriority Creditor's Name

**601 S Minnesota Ave
Sioux Falls, SD 57104**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **6984**

\$311.00

When was the debt incurred? **Opened 05/08 Last Active 7/23/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

4.2
7

Jared-galleria Of Jwlr

Nonpriority Creditor's Name

**375 Ghent Rd
Fairlawn, OH 44333**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **0606**

\$0.00

When was the debt incurred? **Opened 03/14 Last Active 5/13/15**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

4.2
8

Kohls/Capital One

Nonpriority Creditor's Name

**Kohls Credit
Po Box 3043
Milwaukee, WI 53201**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **9529**

\$1,455.00

When was the debt incurred? **Opened 11/10 Last Active 6/28/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.2
9

Lending Club Corp

Nonpriority Creditor's Name

**71 Stevenson St
Suite 300
San Francisco, CA 94105**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **0237**

\$3,383.00

When was the debt incurred? **Opened 06/16 Last Active 8/17/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Unsecured**

4.3
0

Lending Club Corp

Nonpriority Creditor's Name

**71 Stevenson St
Suite 300
San Francisco, CA 94105**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **9003**

\$1,793.00

When was the debt incurred? **Opened 10/15 Last Active 8/10/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Unsecured**

4.3
1

Leroys Jewelers

Nonpriority Creditor's Name

**Sterling Jewelers, Inc/Attn:
Bankruptcy
Po Box 1799
Akron, OH 44309**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **3126**

\$478.00

When was the debt incurred? **Opened 05/94 Last Active 6/28/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.3
2

Mariner Finance

Nonpriority Creditor's Name

**8211 Town Center Dr
Nottingham, MD 21236**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **1613**

\$5,077.00

When was the debt incurred? **Opened 11/18/16 Last Active 6/30/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Secured**

4.3
3

Mariner Finance

Nonpriority Creditor's Name

**8211 Town Center Dr
Nottingham, MD 21236**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **8213**

\$0.00

When was the debt incurred? **Opened 2/27/16 Last Active 11/18/16**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Secured**

4.3
4

Mariner Finance

Nonpriority Creditor's Name

**8211 Town Center Dr
Nottingham, MD 21236**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **5721**

\$0.00

When was the debt incurred? **Opened 12/31/14 Last Active 2/27/16**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Secured**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.3
5

Navient

Nonpriority Creditor's Name
**Navient US Dept of Ed Loan
Servicing
Po Box 9635
Wilkes-Barr, PA 18773**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **1024**

\$0.00

When was the debt incurred? **Opened 10/05 Last Active
11/25/11**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

Educational

4.3
6

Onemain

Nonpriority Creditor's Name

**Po Box 1010
Evansville, IN 47706**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **9189**

\$14,712.00

When was the debt incurred? **Opened 09/16 Last Active
7/28/17**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Note Loan**

4.3
7

Onemain

Nonpriority Creditor's Name

**Po Box 1010
Evansville, IN 47706**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **5256**

\$11,906.00

When was the debt incurred? **Opened 08/16 Last Active
7/24/17**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Note Loan**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.3
8

Onemain Financial

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 3251
Evansville, IN 47731**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **1525**

\$0.00

When was the debt incurred? **Opened 11/18/14 Last Active 11/11/15**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Unsecured**

4.3
9

Onemain Financial

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 3251
Evansville, IN 47731**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **8117**

\$0.00

When was the debt incurred? **Opened 6/09/14 Last Active 11/18/14**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Unsecured**

4.4
0

Onemain Financial

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 3251
Evansville, IN 47731**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **7299**

\$0.00

When was the debt incurred? **Opened 9/28/16 Last Active 2/03/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Unsecured**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.4
1

Onemain Financial

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 3251
Evansville, IN 47731**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **6622**

\$0.00

When was the debt incurred? **Opened 8/23/16 Last Active 2/03/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Unsecured**

4.4
2

Onemain Financial

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 3251
Evansville, IN 47731**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **5666**

\$0.00

When was the debt incurred? **Opened 5/20/15 Last Active 9/28/16**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Unsecured**

4.4
3

Onemain Financial

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 3251
Evansville, IN 47731**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **1541**

\$0.00

When was the debt incurred? **Opened 11/18/14 Last Active 5/20/15**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Unsecured**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.4
4

Onemain Financial

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 3251
Evansville, IN 47731**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **4520**

\$0.00

When was the debt incurred? **Opened 12/26/13 Last Active 11/18/14**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Unsecured**

4.4
5

Onemain Financial

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 3251
Evansville, IN 47731**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **4704**

\$0.00

When was the debt incurred? **Opened 3/03/11 Last Active 12/26/13**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Unsecured**

4.4
6

Onemain Financial

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 3251
Evansville, IN 47731**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **0526**

\$0.00

When was the debt incurred? **Opened 11/11/15 Last Active 8/23/16**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Unsecured**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.4
7

PayPal Credit

Nonpriority Creditor's Name

**PO Box 105658
Atlanta, GA 30348-5668**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **3165**

\$1,868.34

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

4.4
8

Springleaf Financial S

Nonpriority Creditor's Name

**4000 Route 130 Ste 12
Delran, NJ 08075**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **1126**

\$0.00

When was the debt incurred? **Opened 04/06 Last Active 12/29/12**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Line Secured**

4.4
9

Syncb/home Design Ami

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **5570**

\$1,118.00

When was the debt incurred? **Opened 03/16 Last Active 8/11/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.5
0

Synchb/modelis

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **1967**

\$0.00

When was the debt incurred? **Opened 3/09/08 Last Active 9/16/13**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

4.5
1

Synchrony Bank/ JC Penneys

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **2929**

\$708.00

When was the debt incurred? **Opened 03/13 Last Active 7/24/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

4.5
2

Synchrony Bank/ JC Penneys

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **6443**

\$0.00

When was the debt incurred? **Opened 5/08/06 Last Active 6/12/16**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.5
3

Synchrony Bank/ Old Navy

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **1258**

\$0.00

When was the debt incurred? **Opened 06/04 Last Active 2/11/08**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

4.5
4

Synchrony Bank/ Old Navy

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **3528**

\$0.00

When was the debt incurred? **Opened 12/28/09 Last Active 9/23/12**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

4.5
5

Synchrony Bank/Amazon

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **2792**

\$488.00

When was the debt incurred? **Opened 07/13 Last Active 7/24/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.5
6

Synchrony Bank/TJX

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **8140**

\$268.00

When was the debt incurred? **Opened 09/16 Last Active 7/24/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

4.5
7

Synchrony Bank/Walmart

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **1221**

\$3,109.00

When was the debt incurred? **Opened 11/15 Last Active 7/24/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

4.5
8

Target

Nonpriority Creditor's Name

**C/O Financial & Retail Srvs
Mailstopn BT POB 9475
Minneapolis, MN 55440**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **6988**

\$825.00

When was the debt incurred? **Opened 04/03 Last Active 7/24/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.5
9

TD Retail Card Services

Nonpriority Creditor's Name

**Attn: Bankruptcy
1000 Macarthur Blvd
Mahwah, NJ 07430**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **6358**

\$0.00

**Opened 05/10 Last Active
12/04/13**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Charge Account**

4.6
0

Toyota Motor Credit Co

Nonpriority Creditor's Name

**Toyota Financial Services
Po Box 8026
Cedar Rapids, IA 52408**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **0001**

\$0.00

**Opened 02/09 Last Active
10/30/13**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Automobile**

4.6
1

Verizon

Nonpriority Creditor's Name

**Verizon Wireless Bankruptcy
Administrati
500 Tecnolgy Dr Ste 500
Weldon Springs, MO 63304**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **6005**

\$0.00

**Opened 06/11 Last Active
4/26/13**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Agriculture**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.6
2

**Visa Dept Store National
Bank/Macy's**

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 8053
Mason, OH 45040**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **9350**

\$880.00

When was the debt incurred? **Opened 06/13 Last Active 7/24/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

4.6
3

**Visa Dept Store National
Bank/Macy's**

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 8053
Mason, OH 45040**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **7270**

\$0.00

When was the debt incurred? **Opened 06/13 Last Active 9/06/15**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

4.6
4

**Visa Dept Store National
Bank/Macy's**

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 8053
Mason, OH 45040**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **7070**

\$0.00

When was the debt incurred? **Opened 4/06/01 Last Active 3/27/08**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

4.6
5

Wells Fargo Bank

Nonpriority Creditor's Name

**Po Box 10438
Mac8235-02f
Des Moines, IA 50306**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **1280**

\$5,227.00

When was the debt incurred? **Opened 08/16 Last Active 7/24/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

4.6
6

Wffnb Retail

Nonpriority Creditor's Name

**Cscl Dispute Team
Des Moines, IA 50306**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **3414**

\$8,141.00

When was the debt incurred? **Opened 10/15 Last Active 8/28/17**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Charge Account**

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

**American General
Financial/Springleaf Fi
1692 Oak Tree Rd
Edison, NJ 08820**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.1** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**American General
Financial/Springleaf Fi
1692 Oak Tree Rd
Edison, NJ 08820**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.2** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**American General
Financial/Springleaf Fi
1692 Oak Tree Rd
Edison, NJ 08820**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.3** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

Last 4 digits of account number

Name and Address
Capital Management Services LP
698 1/2 South Ogden Street
Buffalo, NY 14206

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.24** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

8462

Name and Address
Capital One
15000 Capital One Dr
Richmond, VA 23238

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.4** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Capital One
15000 Capital One Dr
Richmond, VA 23238

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.5** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Capital One
15000 Capital One Dr
Richmond, VA 23238

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.6** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Capital One
15000 Capital One Dr
Richmond, VA 23238

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.7** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Chase Card
Po Box 15298
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.9** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Citibank / Sears
Po Box 6282
Sioux Falls, SD 57117

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.12** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Citibank/Best Buy
50 Northwest Point Road
Elk Grove Village, IL 60007

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.13** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Citicards Cbna
Po Box 6241
Sioux Falls, SD 57117

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.14** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Citifinancia
605 Munn Road
Fort Mill, SC 29715

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.15** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Citifinancia
605 Munn Road
Fort Mill, SC 29715

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.16** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

Comenity Bank/Victoria Secret
Po Box 182789
Columbus, OH 43218

Line **4.17** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Comenity Capital Bank/HSN
995 W 122nd Ave
Westminster, CO 80234

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.18** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Comenity Capital/blair
Po Box 182120
Columbus, OH 43218

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.19** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Comenitycapital/overst
Po Box 182120
Columbus, OH 43218

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.21** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Dell Financial Services
Po Box 81607
Austin, TX 78708

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.22** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Discover Financial
Po Box 15316
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.23** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Discover Financial
Po Box 15316
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.24** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
First Premier Bank
3820 N Louise Ave
Sioux Falls, SD 57107

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.25** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
First Premier Bank
3820 N Louise Ave
Sioux Falls, SD 57107

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.26** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Kohls/Capital One
N56 W 17000 Ridgewood Dr
Menomonee Falls, WI 53051

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.28** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Lending Club Corp
71 Stevenson St Ste 300
San Francisco, CA 94105

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.29** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Lending Club Corp
71 Stevenson St Ste 300
San Francisco, CA 94105

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.30** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

Last 4 digits of account number

Name and Address
Leroys Jewelers
375 Ghent Rd
Akron, OH 44333

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.31** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Navient
11100 Usa Pkwy
Fishers, IN 46037

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.35** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Northland Group
PO Box 390905
Minneapolis, MN 55439

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.12** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

9680

Name and Address
Northland Group
PO Box 390905
Minneapolis, MN 55439

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.28** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

9265

Name and Address
Onemain Financial
6801 Colwell Blvd
Irving, TX 75039

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.38** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Onemain Financial
6801 Colwell Blvd
Irving, TX 75039

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.39** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Onemain Financial
6801 Colwell Blvd
Irving, TX 75039

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.40** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Onemain Financial
6801 Colwell Blvd
Irving, TX 75039

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.41** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Onemain Financial
6801 Colwell Blvd
Irving, TX 75039

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.42** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Onemain Financial
6801 Colwell Blvd
Irving, TX 75039

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.43** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Onemain Financial
6801 Colwell Blvd
Irving, TX 75039

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.44** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

Onemain Financial
6801 Colwell Blvd
Irving, TX 75039

Line **4.45** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Onemain Financial
6801 Colwell Blvd
Irving, TX 75039

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.46** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
PayPal Credit
PO Box 5138
Timonium, MD 21094

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.47** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

3165

Name and Address
Syncb/home Design Ami
C/o Po Box 965036
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.49** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Syncb/modells
Po Box 965005
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.50** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Synchrony Bank/ JC Penneys
Po Box 965007
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.51** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Synchrony Bank/ JC Penneys
Po Box 965007
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.52** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Synchrony Bank/ Old Navy
Po Box 965005
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.53** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Synchrony Bank/ Old Navy
Po Box 965005
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.54** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Synchrony Bank/Amazon
Po Box 965015
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.55** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Synchrony Bank/TJX
Po Box 965005
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.56** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Synchrony Bank/Walmart
Po Box 965024
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.57** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

Last 4 digits of account number

Name and Address
Target
Po Box 673
Minneapolis, MN 55440

On which entry in Part 1 or Part 2 did you list the original creditor?
Line **4.58** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
TD Retail Card Services
1000 Macarthur Blvd
Mahwah, NJ 07430

On which entry in Part 1 or Part 2 did you list the original creditor?
Line **4.59** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Toyota Motor Credit Co
4 Gatehall Dr Ste 350
Parsippany, NJ 07054

On which entry in Part 1 or Part 2 did you list the original creditor?
Line **4.60** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Verizon
Po Box 650584
Dallas, TX 75265

On which entry in Part 1 or Part 2 did you list the original creditor?
Line **4.61** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Visa Dept Store National
Bank/Macy's
Po Box 8218
Mason, OH 45040

On which entry in Part 1 or Part 2 did you list the original creditor?
Line **4.62** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Visa Dept Store National
Bank/Macy's
Po Box 8218
Mason, OH 45040

On which entry in Part 1 or Part 2 did you list the original creditor?
Line **4.63** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Visa Dept Store National
Bank/Macy's
Po Box 8218
Mason, OH 45040

On which entry in Part 1 or Part 2 did you list the original creditor?
Line **4.64** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Wells Fargo Bank
Po Box 14517
Des Moines, IA 50306

On which entry in Part 1 or Part 2 did you list the original creditor?
Line **4.65** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
William E. Brewer, Esq.
PO Box 1001
Marmora, NJ 08223

On which entry in Part 1 or Part 2 did you list the original creditor?
Line **4.32** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claims from Part 1			Total Claim	
6a.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00

Debtor 1 **Ramon P DeOcampo**
 Debtor 2 **Kathleen T DeOcampo**

Case number (if know) **17-34747**

Total claims from Part 2	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ <u>0.00</u>
	6e. Total Priority. Add lines 6a through 6d.	6e. \$ <u>0.00</u>
Total claims from Part 2	6f. Student loans	6f. \$ <u>0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ <u>0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ <u>0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ <u>87,722.34</u>
	6j. Total Nonpriority. Add lines 6f through 6i.	6j. \$ <u>87,722.34</u>

Fill in this information to identify your case:

Debtor 1 **Ramon P DeOcampo**
First Name Middle Name Last Name

Debtor 2 **Kathleen T DeOcampo**
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number **17-34747**
(if known)

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?**
☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone).** See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease <small>Name, Number, Street, City, State and ZIP Code</small>	State what the contract or lease is for
2.1 Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	
2.2 Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	
2.3 Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	
2.4 Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	
2.5 Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	

Fill in this information to identify your case:

Debtor 1 **Ramon P DeOcampo**
First Name Middle Name Last Name

Debtor 2 **Kathleen T DeOcampo**
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number **17-34747**
(if known)

☐ Check if this is an amended filing

Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☒ No
☐ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.*)

☒ No. Go to line 3.
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor
Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.1

Name _____

Number Street
City State ZIP Code

☐ Schedule D, line _____
☐ Schedule E/F, line _____
☐ Schedule G, line _____

3.2

Name _____

Number Street
City State ZIP Code

☐ Schedule D, line _____
☐ Schedule E/F, line _____
☐ Schedule G, line _____

Fill in this information to identify your case:

Debtor 1 Ramon P DeOcampo

Debtor 2 Kathleen T DeOcampo
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number 17-34747
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

		Debtor 1	Debtor 2 or non-filing spouse
<p>1. Fill in your employment information.</p> <p>If you have more than one job, attach a separate page with information about additional employers.</p> <p>Include part-time, seasonal, or self-employed work.</p> <p>Occupation may include student or homemaker, if it applies.</p>	Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
	Occupation	<u>Tool & Mold Maker</u>	<u>Customer Logistic Analyst</u>
	Employer's name	<u>Thal Precision Industries</u>	<u>Johnson & Johnson</u>
	Employer's address	<u>19A Walnut Ave Clark, NJ 07066</u>	<u>23 Orchard Road Skillman, NJ 08558</u>
	How long employed there?	<u>6 years</u>	<u>28 years</u>

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$ <u>4,974.67</u>	\$ <u>6,083.33</u>
3. Estimate and list monthly overtime pay.	+\$ <u>606.28</u>	+\$ <u>0.00</u>
4. Calculate gross income. Add line 2 + line 3.	\$ <u>5,580.95</u>	\$ <u>6,083.33</u>

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if known) **17-34747**

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ 5,580.95	\$ 6,083.33
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 1,299.74	\$ 1,163.59
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 365.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 280.80
5e. Insurance	5e. \$ 0.00	\$ 493.26
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify: <u>Saving Plan Loan 2</u>	5h. \$ 0.00	\$ 312.43
<u>Saving Plan Loan 3</u>	\$ 0.00	\$ 263.47
<u>Employee Stock Purchase</u>	\$ 0.00	\$ 43.33
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 1,299.74	\$ 2,921.88
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 4,281.21	\$ 3,161.45
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 0.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify: <u>Home Depot</u>	8h. \$ 900.00	\$ 0.00
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 900.00	\$ 0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 5,181.21	\$ 3,161.45
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:	11. +\$ 0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and <i>Related Data</i> , if it applies	12. \$ 8,342.66 Combined monthly income	
13. Do you expect an increase or decrease within the year after you file this form?		
<input type="checkbox"/> No.		
<input checked="" type="checkbox"/> Yes. Explain: <u>Husband may have 2nd job income reduction or lost after filing.</u>		

Fill in this information to identify your case:

Debtor 1 Ramon P DeOcampo

Debtor 2 Kathleen T DeOcampo
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number 17-34747
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☐ No. Go to line 2.

☒ Yes. Does Debtor 2 live in a separate household?

☒ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household* of Debtor 2.

2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes. Fill out this information for each dependent.....

Do not state the dependents names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Daughter

17

☐ No

☒ Yes

Son

18

☐ No

☒ Yes

☐ No

☐ Yes

☐ No

☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 1,544.62

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 240.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if known) **17-34747**

6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	350.00
6b. Water, sewer, garbage collection	6b. \$	50.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	525.00
6d. Other. Specify: _____	6d. \$	0.00
7. Food and housekeeping supplies	7. \$	1,600.00
8. Childcare and children's education costs	8. \$	0.00
9. Clothing, laundry, and dry cleaning	9. \$	250.00
10. Personal care products and services	10. \$	200.00
11. Medical and dental expenses	11. \$	200.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	485.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	250.00
14. Charitable contributions and religious donations	14. \$	100.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	150.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	533.00
15d. Other insurance. Specify: _____	15d. \$	0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____		
16. \$		0.00
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	446.00
17b. Car payments for Vehicle 2	17b. \$	199.00
17c. Other. Specify: _____	17c. \$	0.00
17d. Other. Specify: _____	17d. \$	0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		
18. \$		0.00
19. Other payments you make to support others who do not live with you.		
19. \$		0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
21. Other: Specify: Timeshare Maintenance Fees	21. +\$	65.00
22. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	7,187.62
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	7,187.62
23. Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	8,342.66
23b. Copy your monthly expenses from line 22c above.	23b. -\$	7,187.62
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	1,155.04
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain here: _____		

Fill in this information to identify your case:

Debtor 1	Ramon P DeOcampo		
	First Name	Middle Name	Last Name
Debtor 2	Kathleen T DeOcampo		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>DISTRICT OF NEW JERSEY</u>			
Case number (if known)	17-34747		

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Ramon P DeOcampo

Ramon P DeOcampo

Signature of Debtor 1

Date November 28, 2017

X /s/ Kathleen T DeOcampo

Kathleen T DeOcampo

Signature of Debtor 2

Date November 28, 2017

Fill in this information to identify your case:

Debtor 1 **Ramon P DeOcampo**
First Name Middle Name Last Name

Debtor 2 **Kathleen T DeOcampo**
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **DISTRICT OF NEW JERSEY**

Case number **17-34747**
(if known)

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☒ Married
☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

Dates Debtor 1
lived there

Debtor 2 Prior Address:

Dates Debtor 2
lived there

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

- ☒ No
☐ Yes. Make sure you fill out *Schedule H: Your Creditors* (Official Form 106H).

Part 2 Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
☒ Yes. Fill in the details.

Debtor 1

Sources of income
Check all that apply.

Gross income
(before deductions and
exclusions)

\$84,955.00

☒ Wages, commissions,
bonuses, tips

☐ Operating a business

Debtor 2

Sources of income
Check all that apply.

Gross income
(before deductions and
exclusions)

\$75,888.00

☒ Wages, commissions,
bonuses, tips

☐ Operating a business

**From January 1 of current year until
the date you filed for bankruptcy:**

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if known) **17-34747**

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2016)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$85,946.00	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$71,274.00
For the calendar year before that: (January 1 to December 31, 2015)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$75,776.00	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$67,794.00

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☒ No
☐ Yes. Fill in the details.

Debtor 1	Debtor 2
Sources of income Describe below.	Sources of income Describe below.
Gross income from each source (before deductions and exclusions)	Gross income (before deductions and exclusions)

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

- ☐ No. Go to line 7.
☐ Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☐ No. Go to line 7.
☒ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
Ally Financial Attn: Bankruptcy Po Box 380901 Bloomington, MN 55438	Regular monthly payments	\$1,338.00	\$20,215.00	<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other___

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if known) **17-34747**

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
Midlsex Inv 616 Highway 18 East Brunswick, NJ 08816	Regular monthly payments	\$600.00	\$6,404.00	<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other __
Quickn Loans 1050 Woodward Ave Detroit, MI 48226	Regular monthly payments	\$4,634.00	\$205,193.00	<input checked="" type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other __

7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**
Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

- ☒ No
☐ Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
----------------------------	------------------	-------------------	----------------------	-------------------------

8. **Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**
 Include payments on debts guaranteed or cosigned by an insider.

- ☒ No
☐ Yes. List all payments to an insider

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
----------------------------	------------------	-------------------	----------------------	--

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**
 List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No
☒ Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
Mariner Finance, v. DeOcampo DC-014467-17	Civil		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

10. **Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**
 Check all that apply and fill in the details below.

- ☐ No. Go to line 11.
☒ Yes. Fill in the information below.

Creditor Name and Address	Describe the Property Explain what happened	Date	Value of the property
---------------------------	--	------	-----------------------

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if known) **17-34747**

Creditor Name and Address	Describe the Property	Date	Value of the property
Mariner Finance 8211 Town Center Dr Nottingham, MD 21236	Explain what happened 2007 Toyota Camry (not running) <input checked="" type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized or levied.	11/2017	\$0.00

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
☐ Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
---------------------------	---------------------------------------	-----------------------	--------

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No
☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Dates you contributed	Value
Charity's Name Address (Number, Street, City, State and ZIP Code)			

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No
☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .		

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if known) **17-34747**

Part 7: List Certain Payments or Transfers

16. **Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**
Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☐ No
☒ Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Gillman & Gillman 770 Amboy Avenue Edison, NJ 08837	Attorney Fees		\$2,418.00
Abacus Credit Counseling 15760 Ventura Boulevard Suite 700 Encino, CA 91436	Credit counseling		\$25.00

17. **Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**
Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
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18. **Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**
Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☐ No
☒ Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Debtor 1	Sale of stock through employment		2017
Self			

19. **Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?** (These are often called *asset-protection devices*.)

- ☒ No
☐ Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
---------------	---	------------------------

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if known) **17-34747**

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?
Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

☐ No

☐ Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

☐ No

☐ Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
--	---	-----------------------	-----------------------

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

☐ No

☐ Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
---	--	-----------------------	-----------------------

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

☐ No

☐ Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
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Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- ☐ **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- ☐ **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- ☐ **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

☐ No

☐ Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if known) **17-34747**

25. Have you notified any governmental unit of any release of hazardous material?

- ☐ No
☐ Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☐ No
☐ Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
---------------------------	---	--------------------	--------------------

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A partner in a partnership
☐ An officer, director, or managing executive of a corporation
☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☐ No. None of the above applies. Go to Part 12.
☐ Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
--	---	--

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☐ No
☐ Yes. Fill in the details below.

Name Address (Number, Street, City, State and ZIP Code)	Date Issued
---	-------------

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Ramon P DeOcampo

Ramon P DeOcampo
Signature of Debtor 1

/s/ Kathleen T DeOcampo

Kathleen T DeOcampo
Signature of Debtor 2

Date November 28, 2017

Date November 28, 2017

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☐ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☐ No
☐ Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if known) **17-34747**

Fill in this information to identify your case:

Debtor 1 Ramon P DeOcampo

Debtor 2 Kathleen T DeOcampo
(Spouse, if filing)

United States Bankruptcy Court for the: District of New Jersey

Case number 17-34747
(if known)

Check as directed in lines 17 and 21:

According to the calculations required by this Statement:

☐ 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).

☒ 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).

☐ 3. The commitment period is 3 years.

☒ 4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

☐ Not married. Fill out Column A, lines 2-11.

☒ Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ 7,919.59	\$ 6,563.32
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ 0.00	\$ 0.00
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.	\$ 0.00	\$ 0.00
5. Net income from operating a business, profession, or farm	Debtor 1	
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	-\$ 0.00	
Net monthly income from a business, profession, or farm	\$ 0.00	Copy here -> \$ 0.00
6. Net income from rental and other real property	Debtor 1	
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	-\$ 0.00	
Net monthly income from rental or other real property	\$ 0.00	Copy here -> \$ 0.00

Debtor 1
Debtor 2

Ramon P DeOcampo
Kathleen T DeOcampo

Case number (if known)

17-34747

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
7. Interest, dividends, and royalties	\$ 0.00	\$ 0.00
8. Unemployment compensation	\$ 0.00	\$ 0.00
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:		
For you	\$ 0.00	
For your spouse	\$ 0.00	
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.	\$ 0.00	\$ 0.00
10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.	\$ 0.00	\$ 0.00
	\$ 0.00	\$ 0.00
Total amounts from separate pages, if any.	+ \$ 0.00	\$ 0.00
11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$ 7,919.59	+ \$ 6,563.32 = \$ 14,482.91
		Total average monthly income

Part 2: Determine How to Measure Your Deductions from Income

12. **Copy your total average monthly income from line 11.** \$ 14,482.91

13. **Calculate the marital adjustment.** Check one:

☐ You are not married. Fill in 0 below.

☒ You are married and your spouse is filing with you. Fill in 0 below.

☐ You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

	\$	
	\$	
	+\$	
Total	\$ 0.00	Copy here=> - 0.00

14. **Your current monthly income.** Subtract line 13 from line 12.

\$ 14,482.91

15. **Calculate your current monthly income for the year.** Follow these steps:

15a. Copy line 14 here=> \$ 14,482.91

Multiply line 15a by 12 (the number of months in a year).

x 12

15b. The result is your current monthly income for the year for this part of the form.

\$ 173,794.92

Debtor 1
Debtor 2

Ramon P DeOcampo
Kathleen T DeOcampo

Case number (if known) **17-34747**

16. Calculate the median family income that applies to you. Follow these steps:

- 16a. Fill in the state in which you live. NJ
- 16b. Fill in the number of people in your household. 4
- 16c. Fill in the median family income for your state and size of household. \$ 118,697.00
To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. How do the lines compare?

- 17a. ☐ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3.** Do NOT fill out *Calculation of Your Disposable Income* (Official Form 122C-2).
- 17b. ☒ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2).** On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)

18. Copy your total average monthly income from line 11. \$ 14,482.91

19. **Deduct the marital adjustment if it applies.** If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a. -\$ 0.00

19b. Subtract line 19a from line 18. \$ 14,482.91

20. Calculate your current monthly income for the year. Follow these steps:

20a. Copy line 19b \$ 14,482.91

Multiply by 12 (the number of months in a year). x 12

20b. The result is your current monthly income for the year for this part of the form \$ 173,794.92

20c. Copy the median family income for your state and size of household from line 16c. \$ 118,697.00

21. How do the lines compare?

- ☐ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.
- ☒ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ Ramon P DeOcampo

Ramon P DeOcampo
Signature of Debtor 1

Date November 28, 2017
MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

X /s/ Kathleen T DeOcampo

Kathleen T DeOcampo
Signature of Debtor 2

Date November 28, 2017
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1 Ramon P DeOcampo

Debtor 2 Kathleen T DeOcampo
(Spouse, if filing)

United States Bankruptcy Court for the: District of New Jersey

Case number 17-34747
(if known)

☐ Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/16

To fill out this form, you will need your completed copy of *Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period* (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

4

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. \$ 1,650.00
7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Debtor 1
Debtor 2

Ramon P DeOcampo
Kathleen T DeOcampo

Case number (if known) **17-34747**

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person \$ 49
7b. Number of people who are under 65 X 4
7c. **Subtotal.** Multiply line 7a by line 7b. \$ 196.00 Copy here=> \$ 196.00

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person \$ 117
7e. Number of people who are 65 or older X 0
7f. **Subtotal.** Multiply line 7d by line 7e. \$ 0.00 Copy here=> \$ 0.00

7g. **Total.** Add line 7c and line 7f \$ 196.00 Copy total here=> \$ 196.00

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

■ **Housing and utilities - Insurance and operating expenses**

■ **Housing and utilities - Mortgage or rent expenses**

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities - Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. \$ 726.00

9. **Housing and utilities - Mortgage or rent expenses:**

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. \$ 2,366.00

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Name of the creditor	Average monthly payment
Quickn Loans	\$ <u>1,544.62</u>
Shellpoint Mortgage Servicing	\$ <u>1,128.31</u>

9b. Total average monthly payment \$ 2,672.93 Copy here=> -\$ 2,672.93 Repeat this amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.

\$ 0.00 Copy here=> \$ 0.00

10. **If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.** \$ 0.00

Explain why: _____

Debtor 1
Debtor 2

Ramon P DeOcampo
Kathleen T DeOcampo

Case number (if known) **17-34747**

11. **Local transportation expenses:** Check the number of vehicles for which you claim an ownership or operating expense.

☐ 0. Go to line 14.

☐ 1. Go to line 12.

☒ 2 or more. Go to line 12.

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area. \$ **598.00**
13. **Vehicle ownership or lease expense:** Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1 Describe Vehicle 1: **2012 Honda Accord 77,000 miles**

13a. Ownership or leasing costs using IRS Local Standard..... \$ **485.00**

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1	Average monthly payment
Ally Financial	\$ 446.77

Total Average Monthly Payment

\$ **446.77**

Copy here => -\$ **446.77**

Repeat this amount on line 33b.

13c. Net Vehicle 1 ownership or lease expense

Subtract line 13b from line 13a. if this number is less than \$0, enter \$0.

\$ **38.23**

Copy net Vehicle 1 expense here => \$ **38.23**

Vehicle 2 Describe Vehicle 2: **2007 Subaru Legacy 91,000 miles**

13d. Ownership or leasing costs using IRS Local Standard..... \$ **485.00**

13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthly payment
Midlsex Inv	\$ 99.96

Total average monthly payment

\$ **99.96**

Copy here => -\$ **99.96**

Repeat this amount on line 33c.

13f. Net Vehicle 2 ownership or lease expense

Subtract line 13e from line 13d. if this number is less than \$0, enter \$0.

\$ **385.04**

Copy net Vehicle 2 expense here => \$ **385.04**

14. **Public transportation expense:** If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation* expense allowance regardless of whether you use public transportation. \$ **0.00**

15. **Additional public transportation expense:** If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*. \$ **0.00**

Debtor 1
Debtor 2

Ramon P DeOcampo
Kathleen T DeOcampo

Case number (if known) **17-34747**

Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

16. **Taxes:** The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.
Do not include real estate, sales, or use taxes. \$ **2,850.00**
17. **Involuntary deductions:** The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.
Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. \$ **0.00**
18. **Life Insurance:** The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance.
Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. \$ **150.00**
19. **Court-ordered payments:** The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.
Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. \$ **0.00**
20. **Education:** The total monthly amount that you pay for education that is either required:
☒ as a condition for your job, or
☒ for your physically or mentally challenged dependent child if no public education is available for similar services. \$ **0.00**
21. **Childcare:** The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.
Do not include payments for any elementary or secondary school education. \$ **0.00**
22. **Additional health care expenses, excluding insurance costs:** The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.
Payments for health insurance or health savings accounts should be listed only in line 25. \$ **4.00**
23. **Optional telephone and telephone services:** The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.
Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted. +\$ **60.00**
24. **Add all of the expenses allowed under the IRS expense allowances.**
Add lines 6 through 23. \$ **6,657.27**

Additional Expense Deductions These are additional deductions allowed by the Means Test.
Note: Do not include any expense allowances listed in lines 6-24.

25. **Health insurance, disability insurance, and health savings account expenses.** The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.
- | | | | |
|------------------------|----|---------------|------------------------------------|
| Health insurance | \$ | 474.53 | |
| Disability insurance | \$ | 15.72 | |
| Health savings account | + | \$ | 165.38 |
| Total | \$ | 655.63 | Copy total here=> \$ 655.63 |

Do you actually spend this total amount?

☐ No. How much do you actually spend?

☒ Yes \$

26. **Continued contributions to the care of household or family members.** The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b) \$ **0.00**
27. **Protection against family violence.** The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.
By law, the court must keep the nature of these expenses confidential. \$ **50.00**

Debtor 1
Debtor 2

Ramon P DeOcampo
Kathleen T DeOcampo

Case number (if known) **17-34747**

28. **Additional home energy costs.** Your home energy costs are included in your insurance and operating expenses on line 8.
If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs
You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary. \$ **0.00**
29. **Education expenses for dependent children who are younger than 18.** The monthly expenses (not more than \$160.42* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.
You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.
* Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment. \$ **0.00**
30. **Additional food and clothing expense.** The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.
To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.
You must show that the additional amount claimed is reasonable and necessary. \$ **57.00**
31. **Continuing charitable contributions.** The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).
Do not include any amount more than 15% of your gross monthly income. \$ **100.00**
32. **Add all of the additional expense deductions.** Add lines 25 through 31. \$ **862.63**

Deductions for Debt Payment

33. **For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.**

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Mortgages on your home

33a. Copy line 9b here => **Average monthly payment**
\$ **2,672.93**

Loans on your first two vehicles

33b. Copy line 13b here => \$ **446.77**

33c. Copy line 13e here => \$ **99.96**

- 33d. List other secured debts:

Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?	
-NONE-		<input type="checkbox"/> No	
		<input type="checkbox"/> Yes	\$
		<input type="checkbox"/> No	
		<input type="checkbox"/> Yes	\$
		<input type="checkbox"/> No	
		<input type="checkbox"/> Yes	\$
		<input type="checkbox"/> No	
		<input type="checkbox"/> Yes	\$

33e Total average monthly payment. Add lines 33a through 33d \$ **3,219.66** Copy total here=> \$ **3,219.66**

Debtor 1
Debtor 2

Ramon P DeOcampo
Kathleen T DeOcampo

Case number (if known)

17-34747

34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?

☐ No. Go to line 35.

☒ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount	Monthly cure amount
Quickn Loans	175 Pulaski Avenue Sayreville, NJ 08872 Middlesex County	\$ 3,100.00	÷ 60 = \$ 51.67
Shellpoint Mortgage Servicing	175 Pulaski Avenue Sayreville, NJ 08872 Middlesex County	\$ 52,333.00	÷ 60 = \$ 872.22
		\$	÷ 60 = +\$
Total		\$ 923.89	Copy total here=> \$ 923.89

35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.

☒ No. Go to line 36.

☐ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims \$ **0.00** ÷ 60 \$ **0.00**

36. Projected monthly Chapter 13 plan payment

\$ **1,100.00**

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).
To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

X **10.00**

Average monthly administrative expense

\$ **110.00**

Copy total here=> \$ **110.00**

37. Add all of the deductions for debt payment.
Add lines 33e through 36.

\$ **4,253.55**

Total Deductions from Income

38. Add all of the allowed deductions.

Copy line 24, All of the expenses allowed under IRS expense allowances \$ **6,657.27**
Copy line 32, All of the additional expense deductions \$ **862.63**
Copy line 37, All of the deductions for debt payment +\$ **4,253.55**

Total deductions..... \$ **11,773.45** Copy total here=> \$ **11,773.45**

Debtor 1
Debtor 2

Ramon P DeOcampo
Kathleen T DeOcampo

Case number (if known) **17-34747**

Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)

39. **Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period.** \$ **14,482.91**

40. **Fill in any reasonably necessary income you receive for support for dependent children.** The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. \$ **0.00**

41. **Fill in all qualified retirement deductions.** The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). \$ **1,212.30**

42. **Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A).** Copy line 38 here => \$ **11,773.45**

43. **Deduction for special circumstances.** If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.

Describe the special circumstances	Amount of expense
See Changes re: husband 2nd job income	\$ 1,700.00
	\$
	\$

Total \$ **1,700.00**

Copy here=> \$ **1,700.00**

44. **Total adjustments.** Add lines 40 through 43. => \$ **14,685.75** Copy here=> -\$ **14,685.75**

45. **Calculate your monthly disposable income under § 1325(b)(2).** Subtract line 44 from line 39. \$ **-202.84**

Part 3: Change in Income or Expenses

46. **Change in income or expenses.** If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.

Form	Line	Reason for change	Date of change	Increase or decrease?	Amount of change
<input checked="" type="checkbox"/> 122C-1		Potential loss or reduction of husband second job income.		<input type="checkbox"/> Increase	
<input type="checkbox"/> 122C-2	2		2/1/2018	<input checked="" type="checkbox"/> Decrease	\$ 1,700.00
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	\$
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	\$
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	\$

Debtor 1
Debtor 2

Ramon P DeOcampo
Kathleen T DeOcampo

Case number (if known)

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Part 4: Sign Below

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X /s/ Ramon P DeOcampo

Ramon P DeOcampo

Signature of Debtor 1

Date **November 28, 2017**

MM / DD / YYYY

X /s/ Kathleen T DeOcampo

Kathleen T DeOcampo

Signature of Debtor 2

Date **November 28, 2017**

MM / DD / YYYY

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if known) **17-34747**

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period **06/01/2017** to **11/30/2017**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Home Depot**

Year-to-Date Income:

Starting Year-to-Date Income: **\$8,221.07** from check dated **5/31/2017** .

Ending Year-to-Date Income: **\$18,561.34** from check dated **11/30/2017** .

Income for six-month period (Ending-Starting): **\$10,340.27** .

Average Monthly Income: **\$1,723.38** .

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Thal Precision Industries**

Year-to-Date Income:

Starting Year-to-Date Income: **\$26,499.23** from check dated **5/31/2017** .

Ending Year-to-Date Income: **\$63,676.50** from check dated **11/30/2017** .

Income for six-month period (Ending-Starting): **\$37,177.27** .

Average Monthly Income: **\$6,196.21** .

Debtor 1 **Ramon P DeOcampo**
Debtor 2 **Kathleen T DeOcampo**

Case number (if known) **17-34747**

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **06/01/2017** to **11/30/2017**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Johnson & Johnson**

Year-to-Date Income:

Starting Year-to-Date Income: **\$36,507.68** from check dated **5/31/2017** .

Ending Year-to-Date Income: **\$75,887.60** from check dated **11/30/2017** .

Income for six-month period (Ending-Starting): **\$39,379.92** .

Average Monthly Income: **\$6,563.32** .

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,
and

Your debts are primarily consumer debts.
Consumer debts are defined in 11 U.S.C.
§ 101(8) as "incurred by an individual
primarily for a personal, family, or
household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under
one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan
for family farmers or
fishermen

Chapter 13 - Voluntary repayment plan
for individuals with regular
income

**You should have an attorney review your
decision to file for bankruptcy and the choice of
chapter.**

Chapter 7: Liquidation

\$245	filing fee
\$75	administrative fee
+	\$15 trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal
restitution obligations; and

certain debts that are not listed in your bankruptcy
papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of
fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a
motor vehicle, vessel, or aircraft while intoxicated
from alcohol or drugs.

If your debts are primarily consumer debts, the court
can dismiss your chapter 7 case if it finds that you have
enough income to repay creditors a certain amount.
You must file *Chapter 7 Statement of Your Current
Monthly Income* (Official Form 122A-1) if you are an
individual filing for bankruptcy under chapter 7. This
form will determine your current monthly income and
compare whether your income is more than the median
income that applies in your state.

If your income is not above the median for your state,
you will not have to complete the other chapter 7 form,
the *Chapter 7 Means Test Calculation* (Official Form
122A-2).

If your income is above the median for your state, you
must file a second form—the *Chapter 7 Means Test
Calculation* (Official Form 122A-2). The calculations on
the form—sometimes called the *Means Test*—deduct
from your income living expenses and payments on
certain debts to determine any amount available to pay
unsecured creditors. If

your income is more than the median income for your
state of residence and family size, depending on the
results of the *Means Test*, the U.S. trustee, bankruptcy
administrator, or creditors can file a motion to dismiss
your case under § 707(b) of the Bankruptcy Code. If a
motion is filed, the court will decide if your case should
be dismissed. To avoid dismissal, you may choose to
proceed under another chapter of the Bankruptcy
Code.

If you are an individual filing for chapter 7 bankruptcy,
the trustee may sell your property to pay your debts,
subject to your right to exempt the property or a portion
of the proceeds from the sale of the property. The
property, and the proceeds from property that your
bankruptcy trustee sells or liquidates that you are
entitled to, is called *exempt property*. Exemptions may
enable you to keep your home, a car, clothing, and
household items or to receive some of the proceeds if
the property is sold.

Exemptions are not automatic. To exempt property,
you must list it on *Schedule C: The Property You Claim
as Exempt* (Official Form 106C). If you do not list the
property, the trustee may sell it and pay all of the
proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business,
but is also available to individuals. The provisions of
chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:
http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:
http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

**United States Bankruptcy Court
District of New Jersey**

In re **Ramon P DeOcampo
Kathleen T DeOcampo**

Debtor(s)

Case No. **17-34747**

Chapter **13**

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	3,500.00
Prior to the filing of this statement I have received	\$	2,418.00
Balance Due	\$	1,082.00

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

November 28, 2017

Date

/s/ Justin M. Gillman, Esq.

Justin M. Gillman, Esq.

Signature of Attorney

**Gillman & Gillman
770 Amboy Avenue
Edison, NJ 08837**

Name of law firm

United States Bankruptcy Court
District of New Jersey

In re	<u>Ramon P DeOcampo Kathleen T DeOcampo</u>	Case No.	<u>17-34747</u>
	Debtor(s)	Chapter	<u>13</u>

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date:	<u>November 28, 2017</u>	<u>/s/ Ramon P DeOcampo</u> Ramon P DeOcampo Signature of Debtor
Date:	<u>November 28, 2017</u>	<u>/s/ Kathleen T DeOcampo</u> Kathleen T DeOcampo Signature of Debtor

Certificate of Notice Page 79 of 82

United States Bankruptcy Court
District of New JerseyIn re:
Ramon P DeOcampo
Kathleen T DeOcampo
DebtorsCase No. 17-34747-MBK
Chapter 13

CERTIFICATE OF NOTICE

District/off: 0312-3

User: admin
Form ID: pdf901Page 1 of 4
Total Noticed: 89

Date Rcvd: Dec 22, 2017

Notice by first class mail was sent to the following persons/entities by the Bankruptcy Noticing Center on Dec 24, 2017.

db/jdb
517219745 +Ramon P DeOcampo, Kathleen T DeOcampo, 175 Pulaski Avenue, Sayreville, NJ 08872-1252
++CAPITAL ONE, PO BOX 30285, SALT LAKE CITY UT 84130-0285
(address filed with court: Capital One, 15000 Capital One Dr, Richmond, VA 23238)
517219741 +Capital One, Attn: Bankruptcy, Po Box 30253, Salt Lake City, UT 84130-0253
517219751 +Chase Card, Po Box 15298, Wilmington, DE 19850-5298
517219750 +Chase Card, Attn: Correspondence Dept, Po Box 15298, Wilmington, DE 19850-5298
517219752 +Chase Mtg, P.O. Box 24696, Columbus, OH 43224-0696
517219755 +Citibank / Sears, Po Box 6282, Sioux Falls, SD 57117-6282
517219754 +Citibank / Sears, Citicorp Credit Services/Attn: Centraliz, Po Box 790040,
Saint Louis, MO 63179-0040
517219757 +Citibank/Best Buy, 50 Northwest Point Road, Elk Grove Village, IL 60007-1032
517219756 +Citibank/Best Buy, Centralized Bk/Citicorp Credit Svcs, Po Box 790040,
St Louis, MO 63179-0040
517219759 +Citicards Cbna, Po Box 6241, Sioux Falls, SD 57117-6241
517219758 +Citicards Cbna, Citicorp Credit Svc/Centralized Bankrupt, Po Box 790040,
Saint Louis, MO 63179-0040
517219762 +Citifinancia, 605 Munn Road, Fort Mill, SC 29715-8421
517219760 +Citifinancia, Attn: Bankruptcy, 605 Munn Dr, Fort Mill, SC 29715-8421
517219765 +Comenity Bank/Victoria Secret, Po Box 182789, Columbus, OH 43218-2789
517219764 +Comenity Bank/Victoria Secret, Attn: Bankruptcy, Po Box 182125, Columbus, OH 43218-2125
517219766 +Comenity Capital Bank/HSN, Po Box 182125, Columbus, OH 43218-2125
517219767 +Comenity Capital Bank/HSN, 995 W 122nd Ave, Westminster, CO 80234-3417
517219768 +Comenity Capital/blair, Po Box 182125, Columbus, OH 43218-2125
517219769 +Comenity Capital/blair, Po Box 182120, Columbus, OH 43218-2120
517219770 +Comenitycapital/bosco, Po Box 182120, Columbus, OH 43218-2120
517219771 +Comenitycapital/overst, Comenity Bank, Po Box 182125, Columbus, OH 43218-2125
517219772 +Comenitycapital/overst, Po Box 182120, Columbus, OH 43218-2120
517219773 +DELL FINANCIAL SERVICES, P O BOX 81577, AUSTIN TX 78708-1577
(address filed with court: Dell Financial Services, Attn: Bankruptcy, Po Box 81577,
Austin, TX 78708)
517219774 +Dell Financial Services, Po Box 81607, Austin, TX 78708-1607
517219779 Equifax, P.O. Box 740241, Atlanta, GA 30374-0241
517219780 +Experian, 475 Anton Blvd, Costa Mesa, CA 92626-7037
517219781 +First Premier Bank, 601 S Minnesota Ave, Sioux Falls, SD 57104-4868
517219783 +First Premier Bank, 3820 N Louise Ave, Sioux Falls, SD 57107-0145
517219792 +Leroys Jewelers, Sterling Jewelers, Inc/Attn: Bankruptcy, Po Box 1799,
Akron, OH 44309-1799
517219794 +Mariner Finance, 8211 Town Center Dr, Nottingham, MD 21236-5904
517219797 +Midlsex Inv, 616 Highway 18, East Brunswick, NJ 08816-3707
517219800 +Northland Group, PO Box 390905, Minneapolis, MN 55439-0905
517219823 +PayPal Credit, PO Box 5138, Timonium, MD 21094-5138
517219822 +PayPal Credit, PO Box 105658, Atlanta, GA 30348-5658
517219826 +Shellpoint Mortgage Servicing, 75 Beattie Pl Ste 300, Greenville, SC 29601-2138
517219825 +Shellpoint Mortgage Servicing, Attn: Bankruptcy, Po Box 10826, Greenville, SC 29603-0826
517219849 +TD Retail Card Services, 1000 Macarthur Blvd, Mahwah, NJ 07430-2035
517219848 +TD Retail Card Services, Attn: Bankruptcy, 1000 Macarthur Blvd, Mahwah, NJ 07430-2035
517219851 +TOYOTA MOTOR CREDIT CORPORATION, PO BOX 8026, CEDAR RAPIDS IA 52408-8026
(address filed with court: Toyota Motor Credit Co, 4 Gatehall Dr Ste 350,
Parsippany, NJ 07054)
517219846 +Target, C/O Financial & Retail Svcs, Mailstopn BT POB 9475, Minneapolis, MN 55440-9475
517219847 +Target, Po Box 673, Minneapolis, MN 55440-0673
517219852 TransUnion, P.O. Box 2000, Crum Lynne, PA 19022
517219853 +Verizon, Verizon Wireless Bankruptcy Administrati, 500 Tecnolgy Dr Ste 500,
Weldon Springs, MO 63304-2225
517219854 +Verizon, Po Box 650584, Dallas, TX 75265-0584
517219858 +Visa Dept Store National Bank/Macy's, Po Box 8218, Mason, OH 45040-8218
517219855 +Visa Dept Store National Bank/Macy's, Attn: Bankruptcy, Po Box 8053, Mason, OH 45040-8053
517219862 +Wells Fargo Bank, Po Box 14517, Des Moines, IA 50306-3517
517219861 +Wells Fargo Bank, Po Box 10438, Macf8235-02f, Des Moines, IA 50306-0438
517219863 Wffnb Retail, Cslc Dispute Team, Des Moines, IA 50306
517219864 +William E. Brewer, Esq., PO Box 1001, Marmora, NJ 08223-5001

Notice by electronic transmission was sent to the following persons/entities by the Bankruptcy Noticing Center.
smg E-mail/Text: usanj.njbankr@usdoj.gov Dec 22 2017 22:15:45 U.S. Attorney, 970 Broad St.,
Room 502, Rodino Federal Bldg., Newark, NJ 07102-2534smg +E-mail/Text: ustpreion03.ne.ecf@usdoj.gov Dec 22 2017 22:15:41 United States Trustee,
Office of the United States Trustee, 1085 Raymond Blvd., One Newark Center, Suite 2100,
Newark, NJ 07102-5235517219732 +E-mail/Text: ally@ebn.phinsolutions.com Dec 22 2017 22:15:01 Ally Financial,
Attn: Bankruptcy, Po Box 380901, Bloomington, MN 55438-0901517219733 +E-mail/Text: ally@ebn.phinsolutions.com Dec 22 2017 22:15:01 Ally Financial,
200 Renaissance Ctr, Detroit, MI 48243-1300

District/off: 0312-3

User: admin
Form ID: pdf901

Page 2 of 4
Total Noticed: 89

Date Rcvd: Dec 22, 2017

Notice by electronic transmission was sent to the following persons/entities by the Bankruptcy Noticing Center (continued)

517219734 +E-mail/PDF: cbp@onemainfinancial.com Dec 22 2017 22:17:12
American General Financial/Springleaf Fi, Springleaf Financial/Attn: Bankruptcy De,
Po Box 3251, Evansville, IN 47731-3251

517219737 +E-mail/PDF: cbp@onemainfinancial.com Dec 22 2017 22:17:26
American General Financial/Springleaf Fi, 1692 Oak Tree Rd, Edison, NJ 08820-2853

517219740 +E-mail/Text: cms-bk@cms-collect.com Dec 22 2017 22:15:28 Capital Management Services LP,
698 1/2 South Ogden Street, Buffalo, NY 14206-2317

517219749 +E-mail/PDF: AIS.COAF.EBN@Americaninfosource.com Dec 22 2017 22:17:34
Capital One Auto Finance, 3901 Dallas Pkwy, Plano, TX 75093-7864

517219777 E-mail/Text: mrdiscen@discover.com Dec 22 2017 22:15:03 Discover Financial, Po Box 15316,
Wilmington, DE 19850

517230549 E-mail/Text: mrdiscen@discover.com Dec 22 2017 22:15:03 Discover Bank,
Discover Products Inc, PO Box 3025, New Albany, OH 43054-3025

517219775 +E-mail/Text: mrdiscen@discover.com Dec 22 2017 22:15:03 Discover Financial, Po Box 3025,
New Albany, OH 43054-3025

517219785 +E-mail/Text: BKRMailOPS@weltman.com Dec 22 2017 22:15:31 Jared-galleria Of Jwlr,
375 Ghent Rd, Fairlawn, OH 44333-4601

517219786 +E-mail/Text: bnckohlsnotices@becket-lee.com Dec 22 2017 22:15:05 Kohls/Capital One,
Kohls Credit, Po Box 3043, Milwaukee, WI 53201-3043

517219787 +E-mail/Text: bnckohlsnotices@becket-lee.com Dec 22 2017 22:15:05 Kohls/Capital One,
N56 W 17000 Ridgewood Dr, Menomonee Falls, WI 53051-5660

517219788 +E-mail/Text: bk@lendingclub.com Dec 22 2017 22:16:16 Lending Club Corp, 71 Stevenson St,
Suite 300, San Francisco, CA 94105-2985

517219793 +E-mail/Text: BKRMailOPS@weltman.com Dec 22 2017 22:15:31 Leroy's Jewelers, 375 Ghent Rd,
Akron, OH 44333-4601

517219798 +E-mail/PDF: pa_dc_claims@navient.com Dec 22 2017 22:17:18 Navient,
Navient US Dept of Ed Loan Servicing, Po Box 9635, Wilkes-Barr, PA 18773-9635

517219799 +E-mail/PDF: pa_dc_claims@navient.com Dec 22 2017 22:17:31 Navient, 11100 Usa Pkwy,
Fishers, IN 46037-9203

517219802 +E-mail/PDF: cbp@onemainfinancial.com Dec 22 2017 22:17:12 Onemain, Po Box 1010,
Evansville, IN 47706-1010

517219813 +E-mail/PDF: cbp@onemainfinancial.com Dec 22 2017 22:17:12 Onemain Financial,
6801 Colwell Blvd, Irving, TX 75039-3198

517219804 +E-mail/PDF: cbp@onemainfinancial.com Dec 22 2017 22:17:26 Onemain Financial,
Attn: Bankruptcy, Po Box 3251, Evansville, IN 47731-3251

517219824 +E-mail/Text: bankruptcyteam@quickenloans.com Dec 22 2017 22:16:07 Quickn Loans,
1050 Woodward Ave, Detroit, MI 48226-1906

517219827 E-mail/PDF: cbp@onemainfinancial.com Dec 22 2017 22:17:12 Springleaf Financial S,
4000 Route 130 Ste 12, Delran, NJ 08075

517219828 +E-mail/PDF: gecsedirecoverycorp.com Dec 22 2017 22:17:13 Synchb/home Design Ami,
Attn: Bankruptcy, Po Box 965060, Orlando, FL 32896-5060

517219829 +E-mail/PDF: gecsedirecoverycorp.com Dec 22 2017 22:17:39 Synchb/home Design Ami,
C/o Po Box 965036, Orlando, FL 32896-0001

517219830 +E-mail/PDF: gecsedirecoverycorp.com Dec 22 2017 22:17:26 Synchb/modells, Attn: Bankruptcy,
Po Box 965060, Orlando, FL 32896-5060

517219831 +E-mail/PDF: gecsedirecoverycorp.com Dec 22 2017 22:17:13 Synchb/modells, Po Box 965005,
Orlando, FL 32896-5005

517221275 +E-mail/PDF: gecsedirecoverycorp.com Dec 22 2017 22:17:39 Synchrony Bank,
c/o of PRA Receivables Management, LLC, PO Box 41021, Norfolk, VA 23541-1021

517219832 +E-mail/PDF: gecsedirecoverycorp.com Dec 22 2017 22:17:26 Synchrony Bank/ JC Penneys,
Attn: Bankruptcy, Po Box 965060, Orlando, FL 32896-5060

517219834 +E-mail/PDF: gecsedirecoverycorp.com Dec 22 2017 22:17:26 Synchrony Bank/ JC Penneys,
Po Box 965007, Orlando, FL 32896-5007

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Po Box 965005, Orlando, FL 32896-5005

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Attn: Bankruptcy, Po Box 965060, Orlando, FL 32896-5060

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Po Box 965005, Orlando, FL 32896-5005

517219844 +E-mail/PDF: gecsedirecoverycorp.com Dec 22 2017 22:17:13 Synchrony Bank/Walmart,
Attn: Bankruptcy, Po Box 965060, Orlando, FL 32896-5060

517219845 +E-mail/PDF: gecsedirecoverycorp.com Dec 22 2017 22:17:13 Synchrony Bank/Walmart,
Po Box 965024, Orlando, FL 32896-5024

TOTAL: 38

***** BYPASSED RECIPIENTS (undeliverable, * duplicate) *****

District/off: 0312-3

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Form ID: pdf901

Page 3 of 4
Total Noticed: 89

Date Rcvd: Dec 22, 2017

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Po Box 3251, Evansville, IN 47731-3251
517219738* +American General Financial/Springleaf Fi, 1692 Oak Tree Rd, Edison, NJ 08820-2853
517219739* +American General Financial/Springleaf Fi, 1692 Oak Tree Rd, Edison, NJ 08820-2853
517219746* ++CAPITAL ONE, PO BOX 30285, SALT LAKE CITY UT 84130-0285
(address filed with court: Capital One, 15000 Capital One Dr, Richmond, VA 23238)
517219747* ++CAPITAL ONE, PO BOX 30285, SALT LAKE CITY UT 84130-0285
(address filed with court: Capital One, 15000 Capital One Dr, Richmond, VA 23238)
517219748* ++CAPITAL ONE, PO BOX 30285, SALT LAKE CITY UT 84130-0285
(address filed with court: Capital One, 15000 Capital One Dr, Richmond, VA 23238)
517219742* +Capital One, Attn: Bankruptcy, Po Box 30253, Salt Lake City, UT 84130-0253
517219743* +Capital One, Attn: Bankruptcy, Po Box 30253, Salt Lake City, UT 84130-0253
517219744* +Capital One, Attn: Bankruptcy, Po Box 30253, Salt Lake City, UT 84130-0253
517219753* +Chase Mtg, Po Box 24696, Columbus, OH 43224-0696
517219763* +Citifinancia, 605 Munn Road, Fort Mill, SC 29715-8421
517219761* +Citifinancia, Attn: Bankruptcy, 605 Munn Dr, Fort Mill, SC 29715-8421
517219778* ++DISCOVER FINANCIAL SERVICES LLC, PO BOX 3025, NEW ALBANY OH 43054-3025
(address filed with court: Discover Financial, Po Box 15316, Wilmington, DE 19850)
517219776* +Discover Financial, Po Box 3025, New Albany, OH 43054-3025
517219782* +First Premier Bank, 601 S Minnesota Ave, Sioux Falls, SD 57104-4868
517219784* +First Premier Bank, 3820 N Louise Ave, Sioux Falls, SD 57107-0145
517219789* +Lending Club Corp, 71 Stevenson St, Suite 300, San Francisco, CA 94105-2985
517219790* +Lending Club Corp, 71 Stevenson St Ste 300, San Francisco, CA 94105-2985
517219791* +Lending Club Corp, 71 Stevenson St Ste 300, San Francisco, CA 94105-2985
517219795* +Mariner Finance, 8211 Town Center Dr, Nottingham, MD 21236-5904
517219796* +Mariner Finance, 8211 Town Center Dr, Nottingham, MD 21236-5904
517219801* +Northland Group, PO Box 390905, Minneapolis, MN 55439-0905
517219803* +Onemain, Po Box 1010, Evansville, IN 47706-1010
517219814* +Onemain Financial, 6801 Colwell Blvd, Irving, TX 75039-3198
517219815* +Onemain Financial, 6801 Colwell Blvd, Irving, TX 75039-3198
517219816* +Onemain Financial, 6801 Colwell Blvd, Irving, TX 75039-3198
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517219820* +Onemain Financial, 6801 Colwell Blvd, Irving, TX 75039-3198
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517219805* +Onemain Financial, Attn: Bankruptcy, Po Box 3251, Evansville, IN 47731-3251
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517219809* +Onemain Financial, Attn: Bankruptcy, Po Box 3251, Evansville, IN 47731-3251
517219810* +Onemain Financial, Attn: Bankruptcy, Po Box 3251, Evansville, IN 47731-3251
517219811* +Onemain Financial, Attn: Bankruptcy, Po Box 3251, Evansville, IN 47731-3251
517219812* +Onemain Financial, Attn: Bankruptcy, Po Box 3251, Evansville, IN 47731-3251
517219833* +Synchrony Bank/ JC Penneys, Attn: Bankruptcy, Po Box 965060, Orlando, FL 32896-5060
517219835* +Synchrony Bank/ JC Penneys, Po Box 965007, Orlando, FL 32896-5007
517219837* +Synchrony Bank/ Old Navy, Attn: Bankruptcy, Po Box 965060, Orlando, FL 32896-5060
517219839* +Synchrony Bank/ Old Navy, Po Box 965005, Orlando, FL 32896-5005
517219850* ++TOYOTA MOTOR CREDIT CORPORATION, PO BOX 8026, CEDAR RAPIDS IA 52408-8026
(address filed with court: Toyota Motor Credit Co, Toyota Financial Services, Po Box 8026,
Cedar Rapids, IA 52408)
517219856* +Visa Dept Store National Bank/Macy's, Attn: Bankruptcy, Po Box 8053, Mason, OH 45040-8053
517219857* +Visa Dept Store National Bank/Macy's, Attn: Bankruptcy, Po Box 8053, Mason, OH 45040-8053
517219859* +Visa Dept Store National Bank/Macy's, Po Box 8218, Mason, OH 45040-8218
517219860* +Visa Dept Store National Bank/Macy's, Po Box 8218, Mason, OH 45040-8218

TOTALS: 0, * 49, ## 0

Addresses marked '+' were corrected by inserting the ZIP or replacing an incorrect ZIP.
USPS regulations require that automation-compatible mail display the correct ZIP.

Transmission times for electronic delivery are Eastern Time zone.

Addresses marked '++' were redirected to the recipient's preferred mailing address
pursuant to 11 U.S.C. 342(f)/Fed.R.Bank.PR.2002(g)(4).

I, Joseph Speetjens, declare under the penalty of perjury that I have sent the attached document to the above listed entities in the manner shown, and prepared the Certificate of Notice and that it is true and correct to the best of my information and belief.

Meeting of Creditor Notices only (Official Form 309): Pursuant to Fed. R. Bank. P. 2002(a)(1), a notice containing the complete Social Security Number (SSN) of the debtor(s) was furnished to all parties listed. This official court copy contains the redacted SSN as required by the bankruptcy rules and the Judiciary's privacy policies.

Date: Dec 24, 2017

Signature: /s/Joseph Speetjens

District/off: 0312-3

User: admin
Form ID: pdf901

Page 4 of 4
Total Noticed: 89

Date Rcvd: Dec 22, 2017

CM/ECF NOTICE OF ELECTRONIC FILING

The following persons/entities were sent notice through the court's CM/ECF electronic mail (Email) system on December 21, 2017 at the address(es) listed below:

Albert Russo docs@russotrustee.com
Justin M Gillman on behalf of Debtor Ramon P DeOcampo abgillman@optonline.net,
r47252@notify.bestcase.com
Justin M Gillman on behalf of Joint Debtor Kathleen T DeOcampo abgillman@optonline.net,
r47252@notify.bestcase.com
U.S. Trustee USTPRegion03.NE.ECF@usdoj.gov

TOTAL: 4